

Department of Labor National Life Building, Drawer 20 Montpelier, VT 05620-3401 (802) 828-2286

Form No. 30	
File #:	

Application for Self Insurance

The unders	signed hereby make application for permission	n to insure itself as provided in 21 VS.	A §687(4).			
Name of Employer:		Federal ID No.:				
	f Business:					
Mailing A	ddress:					
Nature of I						
Average N	umber of Employees in Vermont:	Average Number of Emplo	yees Nationally:			
1.	Attach audited balance sheets for the previ	ous three years. Include notes and aug	ditor's comments			
2.	Attach audited balance sheets for the previous three years. Include notes and auditor's comments. Attach audited income statements for the previous three years. Include notes and auditor's comments.					
3.	Attach an annual payroll report for the most recent year, categorized in accordance with the system used by the National					
٥.	Council on Compensation Insurance (NCCI).					
4.	Attach a description and valuation of all real and personal property in Vermont					
5.	Attach a copy of any trust agreement under which funds are held in trust in Vermont and from which claim payments can					
5.	immediately be made.					
6.	Attach a copy of any surety bond, written by a company licensed to do business in the State of Vermont guaranteeing the					
	payment of workers' compensation benefits.					
7.	Attach a copy of any excess insurance policy for workers' compensation claims in excess of the amount of any surety					
8.	bond. Identify by attachment the person or claims adjusting agency who is skilled in workers' compensation claims adjustme					
0.	and has a knowledge of the Vermont Act and who will do the claims adjustment work for the employer. This person or					
	agency must have the full power and author					
9.	Attach a listing and valuation of any assets					
10.						
10.	If you are presently self-insured for workers' compensation, have you established a reserve for the actual value of the reported claims? Yes No.					
	If yes, how much are your reserves? and					
	where are they held?					
11.		financial data define the following ve	ariables as those veriables are defined in			
11.	Using the employer's previous three years financial data, define the following variables as those variables are defined in subsection (c) of §16 of these rules.					
V	ARIABLE					
V I	FY ending	FY ending	FY ending			
	AEC C	φ.	, c			
	AEC \$	<u> </u>				
	F \$	\$ \$ \$ \$	\$ \$ \$ \$			
	E \$		<u> </u>			
	A \$					
	L _\$					
	CA \$	<u> </u>	<u> </u>			
	CL \$	\$	\$			
	I \$	\$	\$			
	TA _ \$	\$	\$			
	S _\$	\$ \$	\$			
	W \$	\$	\$			
	a \$	\$	\$			
	b \$	\$	\$			

		FY Ending	FY Ending	FY Ending
a. Cash Flow Minimum: F \(\geq 0.25 \)				
CL + AEC				
$\begin{array}{c cccc} \textbf{b. Minimum Liquidity:} & & & & & \\ & CA-I & \geq & CA_b-I_b & & \text{and} & & CA-I \\ \hline & CL+AEC & & CL_b & & & CL+AEC \\ \end{array}$	> 0.5			
c. Minimum Working Capital: CA-CL-AEC \geq Ca _b -CL _b and Ca-CL-AEC	AEC > 0.05			
S S _b S				
d. Minimum Net Worth to Debt: $ \frac{A-L}{L+AEC} \ge \frac{A_b-L_b}{L_b} \text{and} \frac{A-L}{L+AEC} > $	0.25			
e. Minimum Profitability: If E -AEC < 0 in not more than one of the three previous E-AEC \ge E _b and E-AEC TA TA_b TA	s years, the employer sh > 0.03	all meet the followin	g test:	
	ost recent year, the employed > 0.03	loyer shall meeting t	he following test:	
	ost recent year the emplo > 0.03	oyer shall meet the fo	ollowing test:	
If E-AEC < 0 for each of the three years, the employer of	does not meet the test fo	r minimum profitabi	lity.	
f. Turnover Minimum: $A-L-AEC \ge A_b-L_b \text{and} A-L-AEC$ $S S_b S$	> 0.05			
I swear under the pains and penalties of perjury that the	foregoing information a	and attachments are a	accurate and correct.	
	Applica	nt's Signature		
At in the C				personally
appeared				
statement.				
В	efore me,Notary	Public		

Using the variables derived above compute each of the following tests for financial years indicated.

12.